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CONFIRMATION NO. 1473

SERIAL NUMBER 10/827,117	FILING DATE 04/19/2004 RULE	CLASS 710	GROUP ART UNIT 2111	ATTORNEY DOCKET NO. NEXTIO.0402
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APPLICANTS

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** CONTINUING DATA *****

yes GER 5/3/06

This appln claims benefit of 60/555,127 03/22/2004
 and is a CIP of 10/802,532 03/16/2004
 which claims benefit of 60/464,382 04/18/2003
 and claims benefit of 60/491,314 07/30/2003
 and claims benefit of 60/515,558 10/29/2003
 and claims benefit of 60/523,522 11/19/2003
 and claims benefit of 60/541,673 02/04/2004
 and is a CIP of 10/757,713 01/14/2004
 and is a CIP of 10/757,711 01/14/2004
 and is a CIP of 10/757,714 01/14/2004 PAT 7,046,668
 which claims benefit of 60/440,788 01/21/2003 *
 and claims benefit of 60/440,789 01/21/2003
 and claims benefit of 60/464,382 04/18/2003
 and claims benefit of 60/491,314 07/30/2003
 and claims benefit of 60/515,558 10/29/2003
 and claims benefit of 60/523,522 11/19/2003

(*)Data provided by applicant is not consistent with PTO records.

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 06/28/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials <i>GER 5/3/06</i>	STATE OR COUNTRY TX	SHEETS DRAWING 22	TOTAL CLAIMS <i>19</i>	INDEPENDENT CLAIMS <i>2</i>
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ADDRESS

23669
 HUFFMAN LAW GROUP, P.C.
 1832 N. CASCADE AVE.

COLORADO SPRINGS , CO
80907-7449

TITLE

Switching apparatus and method for providing shared I/O within a load-store fabric

<p>FILING FEE RECEIVED 558</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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